Medicaid Eligibility Changes

Medical Assistance Administration September 2003

CHANGES

- Income verification
- 6 month review
- Rescind continuous eligibility
- Premiums
- Elimination of MI

Income Verification

New Policy April 1, 2003

Households must verify their income for Children's and Pregnancy medical at:

- Application
- Eligibility review
- Six month report

How Will Income Be Verified?

- Employer contact by telephone or employer statement
- ACES Interfaces
- Wage stubs, award letters
- Inquiry access to with other system (SEMS, SOLQ, GUIDE)
- Collateral contacts
- TALX

Reportable Earned Income Changes

- Job start or stop
- Change in employers
- Increase in salary or wage rate
- Change in status from part time or full time or full time to part time

6 Month Review

New policy July 1, 2003

- Clients on Family and Children's medical will receive a 6 month certification period.
- An eligibility review is completed at the end of 6 months to receive continued medical.

6 Month Review

- Client will need to complete and return a 6-month review;
- Cases will close at 6 months for no review;
- Reported changes will be acted on; and
- Income will be verified.

Rescind Continuous Eligibility

New policy (July 1, 2003)

 Changes will be acted upon and medical eligibility recalculated.

GOOD NEWS:
Pregnancy Medical will retain continuous eligibility.

Premiums

Anticipated Policy January 1, 2004

Premiums required for optional children:

- 1. Apply Sneede-Kizer rules if applicable;
- 2. Determine if child must pay premiums;
- 3. Premium based on <u>net available income.</u>

Premiums

Premiums will be required for the following groups of optional children:

0 - 1

1 - 5

6 - 19

Income above

185% FPL

133% FPL

100% FPL

200% FPL Medicaid (F06) & 250% FPL SCHIP (F07)

Optional Coverage Groups – Premiums Imposed

185% FPL 0-1 Year of Age Family of 4 Income \$2837

Income does not apply to newborn of moms on Medicaid 133% FPL
1-5 years of Age
Family of 4
Income
\$2040

100% FPL
6-19 Years of Age
Family of 4
Income
\$1534

Mandatory Coverage Groups Exempt from premiums

Premiums

FPL Premium amount

100% to 150% \$15

151% to 200% \$20

201% to 250% \$25

Household max = total of the three highest premiums

TELL ME ABOUT SNEEDE-KIZER

What is Sneede-Kizer?

Sneede v. Kizer (S/K) is the name of a Ninth Circuit Court of Appeals class action settlement.

Two key elements of S/K:

- Children are not financially responsible for their parents or siblings, and
- Spouses <u>are</u> financially responsible for each other and their children.

Overview

S/K characteristics are:

- Child with income
- Child with resources that make the family ineligible
- Child who lives with unmarried parents
- Child who lives with an adult who is not their parent**

Separate Medical Assistance Units

- Any child with S/K characteristic must have a separate MAU.
- A household with S/K characteristics will have multiple MAUs.
- Each MAU will receive a review form and medical ID card.



Eliminate MI Program

- ✓ MI program ends June 30, 2003.
- Hospitals may submit applications for retro medical until 9/30/03.
- No approval for services after 6/30/03.
- No program to replace MI.

Options for elimination of MI

- 1. Apply at the CSO to see if you are eligible for another program.
- 2. Hospitals are required to offer "charity care" (WAC 246-453-020)
- 3. New Psychiatric Indigent Inpatient program available July 1, 2003 (WAC 388-865-0217).
- 4. ITA pay through MMIS same as before.

MAA Web Site

Information on upcoming medical program changes can be found at:

http://fortress.wa.gov/dshs/maa/ ProgramChanges2003/

Questions?

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